

Advance Relocation and Storage Systems, Inc.

Case No 2019-67 T

Late Filed Exhibit No. 4

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INSURANCE QUOTE

This form **MUST BE COMPLETED**.

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. **THIS IS ONLY A QUOTE.**

The following insurance quote is for:

ADVANCE RELOCATION AND STORAGE SYSTEMS, INC.

Name of Applicant

200 PURRYSBURG RD., HARDEEVILLE, SC 29927

Address of Applicant

Amount of Premium:

Limits Quoted: (See Below)

Liability Insurance \$ 18,687.00

Limits 1,000,000

Cargo Insurance \$ 2,413.00

Limits 200,000 ANY ONE VEHICLE

* Attach Certificate of Insurance if available.

TRANSGUARD INSURANCE COMPANY OF AMERICA, INC.

Name of Insurance Company

215 SHURMAN BLVD, SUITE 400, NAPERVILLE, IL 60563

Home Office Address of Company

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

* Form 'B' and Form 'H' Certificates of Insurance are required to be filed with the Office of Regulatory Staff (ORS). The schedule of minimum limits for Household Goods carriers are listed below:

Vehicle liability for vehicles less than 10,000 lbs. GVWR	\$ 500,000
Vehicle liability for vehicles 10,000 lbs. or more GVWR	\$ 750,000
Cargo - For loss of or damage to property carried on any one motor vehicle	\$ 2,500
For loss of or damage to or aggregate of losses of damages of or to property occurring at any one time and place	\$ 5,000

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-2903.

If you wish to apply as a self-insured for workers' compensation coverage in South Carolina, you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$300,000; 2) agree to pay a yearly self-insurance tax; and 3) agree to pay an annual assessment to the South Carolina Special Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 227-5712 or on the web at www.wcc.state.sc.us/self-insurance.